

County: Polk
WILLOW RIDGE HEALTHCARE
400 DERONDA STREET

Facility ID: 2440

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AMERY 54001 Phone: (715) 268-8171
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/03): 72
Total Licensed Bed Capacity (12/31/03): 84
Number of Residents on 12/31/03: 68

Ownership: Limited Liability Company
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 67

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		22.1
Supp. Home Care-Personal Care	No					1 - 4 Years		42.6
Supp. Home Care-Household Services	No	Developmental Disabilities	2.9	Under 65	2.9	More Than 4 Years		25.0
Day Services	No	Mental Illness (Org./Psy)	14.7	65 - 74	2.9			-----
Respite Care	No	Mental Illness (Other)	7.4	75 - 84	35.3			89.7
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	44.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	5.9	95 & Over	14.7	Full-Time Equivalent		
Congregate Meals	No	Cancer	4.4		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	7.4		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	25.0	65 & Over	97.1	-----		
Transportation	No	Cerebrovascular	17.6		-----	RNs		9.5
Referral Service	No	Diabetes	8.8	Gender	%	LPNs		7.2
Other Services	No	Respiratory	5.9		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	25.0	Aides, & Orderlies		
Mentally Ill	No		-----	Female	75.0			49.8
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%		
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	7	100.0	287	37	90.2	116	0	0.0	0	18	90.0	130	0	0.0	0	0	0.0	62	91.2
Intermediate	---	---	---	3	7.3	98	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	3	4.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	1	5.0	78	0	0.0	0	0	0.0	1	1.5
Personal Care	---	---	---	0	0.0	0	0	0.0	0	1	5.0	70	0	0.0	0	0	0.0	1	1.5
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	1	2.4	169	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	1.5
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	7	100.0		41	100.0		0	0.0		20	100.0		0	0.0		0	0.0	68	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	10.5	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	7.0	Bathing	1.5	79.4	19.1	68
Other Nursing Homes	3.5	Dressing	20.6	69.1	10.3	68
Acute Care Hospitals	78.9	Transferring	23.5	69.1	7.4	68
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	25.0	69.1	5.9	68
Rehabilitation Hospitals	0.0	Eating	63.2	32.4	4.4	68
Other Locations	0.0	*****				
Total Number of Admissions	57	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	8.8	Receiving Respiratory Care		14.7
Private Home/No Home Health	1.8	Occ/Freq. Incontinent of Bladder	55.9	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	42.1	Occ/Freq. Incontinent of Bowel	11.8	Receiving Suctioning		0.0
Other Nursing Homes	8.8			Receiving Ostomy Care		1.5
Acute Care Hospitals	7.0	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	5.9	Receiving Mechanically Altered Diets		23.5
Rehabilitation Hospitals	0.0					
Other Locations	1.8	Skin Care		Other Resident Characteristics		
Deaths	38.6	With Pressure Sores	1.5	Have Advance Directives		79.4
Total Number of Discharges		With Rashes	2.9	Medications		
(Including Deaths)	57			Receiving Psychoactive Drugs		51.5

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	78.8	80.8	0.98	83.7	0.94	84.0	0.94	87.4	0.90
Current Residents from In-County	80.9	73.7	1.10	72.8	1.11	76.2	1.06	76.7	1.05
Admissions from In-County, Still Residing	31.6	19.8	1.60	22.7	1.39	22.2	1.42	19.6	1.61
Admissions/Average Daily Census	85.1	137.9	0.62	113.6	0.75	122.3	0.70	141.3	0.60
Discharges/Average Daily Census	85.1	138.0	0.62	115.9	0.73	124.3	0.68	142.5	0.60
Discharges To Private Residence/Average Daily Census	37.3	62.1	0.60	48.0	0.78	53.4	0.70	61.6	0.61
Residents Receiving Skilled Care	91.2	94.4	0.97	94.7	0.96	94.8	0.96	88.1	1.04
Residents Aged 65 and Older	97.1	94.8	1.02	93.1	1.04	93.5	1.04	87.8	1.11
Title 19 (Medicaid) Funded Residents	60.3	72.0	0.84	67.2	0.90	69.5	0.87	65.9	0.91
Private Pay Funded Residents	29.4	17.7	1.66	21.5	1.37	19.4	1.51	21.0	1.40
Developmentally Disabled Residents	2.9	0.8	3.74	0.7	4.10	0.6	4.65	6.5	0.45
Mentally Ill Residents	22.1	31.0	0.71	39.1	0.56	36.5	0.60	33.6	0.66
General Medical Service Residents	0.0	20.9	0.00	17.2	0.00	18.8	0.00	20.6	0.00
Impaired ADL (Mean)	41.8	45.3	0.92	46.1	0.91	46.9	0.89	49.4	0.84
Psychological Problems	51.5	56.0	0.92	58.7	0.88	58.4	0.88	57.4	0.90
Nursing Care Required (Mean)	5.5	7.2	0.76	6.7	0.82	7.2	0.77	7.3	0.75